

County Administrator's Office
Kewaunee County Courthouse
810 Lincoln Street
Kewaunee, WI 54216

KEWAUNEE COUNTY JOB POSTING FORM

(Please type or print)

BARGAINING UNIT: _____ DATE OF APPLICATION: _____

POSITION POSTING FOR:	LOCATION/DEPARTMENT:	FULL TIME OR PART-TIME
LAST NAME:	FIRST NAME:	MIDDLE NAME:
ADDRESS:	CITY:	STATE/ZIP CODE:
Daytime Phone:	P.M. Phone:	Social Security #:
Have you ever been employed in this department before: Yes or No	If yes, give date:	Driver's License: Yes or No Number:

EDUCATION INFORMATION

SCHOOL	NAME & ADDRESS	COURSE OF STUDY	GRADUATE?	LIST DIPLOMA
Elementary			YES or NO	
High School			YES or NO	
College or University			YES or NO	
Other (Specify)				

Describe any education or training you have had which is not covered above, such as vocational school, correspondence courses, service schools, in-service training, special job-related skills and qualifications acquired from employment or volunteer work which you feel is relevant to the job for which you are posting. Also, include relevant occupational licenses or certificates (BE SPECIFIC):

List any machinery or heavy equipment that you have operated efficiently: _____

CLERICAL APPLICANTS PLEASE CHECK THE SKILLS YOU HAVE:

Typing Experience? YES or NO Words per Minute:	Calculator experience? YES or NO Keystrokes/minute:
Worked on a switchboard? YES or NO	Do you know shorthand? YES or NO W.P.M. _____
Multi line telephone systems? YES or NO	Have you worked with dictating equipment? YES or NO
Have you worked on a personal computer? YES or NO	List software used:

Can you perform the essential duties and responsibilities of the job for which you are posting with or without reasonable accommodations? YES _____ or NO _____ Please explain any accommodations you require: _____

Employees are considered for all postings without regard to race, color, religion, sex, national origin, ancestry, age, marital or veteran status, sexual orientation, arrest or conviction record, or disability.

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EMPLOYMENT EXPERIENCE

Start with your present position. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex or national origin. Be as complete as possible.

CURRENT EMPLOYER:	DATES EMPLOYED	WORK PERFORMED
Phone:	Start Date:	
Address:	Start Pay:	
Job Title:		
Supervisor:	End Date:	
Reason for leaving:	End Pay:	

EMPLOYER:	DATES EMPLOYED	WORK PERFORMED
Phone:	Start Date:	
Address:	Start Pay:	
Job Title:		
Supervisor:	End Date:	
Reason for leaving:	End Pay:	

EMPLOYER:	DATES EMPLOYED	WORK PERFORMED
Phone:	Start Date:	
Address:	Start Pay:	
Job Title:		
Supervisor:	End Date:	
Reason for leaving:	End Pay:	

EMPLOYER:	DATES EMPLOYED	WORK PERFORMED
Phone:	Start Date:	
Address:	Start Pay:	
Job Title:		
Supervisor:	End Date:	
Reason for leaving:	End Pay:	

EMPLOYER:	DATES EMPLOYED	WORK PERFORMED
Phone:	Start Date:	
Address:	Start Pay:	
Job Title:		
Supervisor:	End Date:	
Reason for leaving:	End Pay:	

If you need additional space, please continue on a separate sheet of paper.

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Are you including any attachments (resume or other)? Yes _____ No _____
If yes, how many pages? _____

Please staple attachments to the back of this form. Thank you.

PERSONAL REFERENCES

Give name, address and telephone number of three references who are not related to you, are not previous employers, and can provide information about your abilities to perform the job for which you are posting.

	REFERENCE 1	REFERENCE 2	REFERENCE 3
Full Name			
Address			
City			
State, Zip Code			
Telephone No.			

CONSENT

In considering my application for this position, the County may verify the information on this application and obtain additional information relating to my background.

I authorize all persons, schools, companies, corporations, and law enforcement agencies to supply information necessary concerning my background.

I hereby affirm that the foregoing information is true and correct.

Posting Applicant's Signature

Date

Posting forms should be submitted prior to posting deadline to the County Administrator's Office in a sealed envelope with the following information on the front of the envelope:

POSTING APPLICATION FORM
DATE SUBMITTED
POSITION TITLE

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NEPOTISM

The employment of immediate family members in a supervisor-subordinate relationship may cause serious conflicts and problems with favoritism and employee morale. In addition to claims of partiality in treatment at work, personal conflicts from outside the work environment can be carried into day to day working relationships.

No person shall be employed, promoted, or transferred to any department or agency of Kewaunee County when the employment, promotion or transfer will result in a supervisor-subordinate relationship between immediate family members. Immediate family is defined as wife, husband, father, step father, mother, step mother, guardian, sister, step sister, brother, step brother, child, step child, aunt, uncle, grandchild, grandparent, father-in-law, mother-in-law, sister-in-law, or brother-in-law.

If a violation of this policy is established after employment, through marriage or other means, the individuals concerned will decide who is to be transferred or terminated. If that decision is not made within 30 calendar days, management will decide.

This policy does not apply to temporary employees.